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Fill in this information to identify your case:		
United States Bankruptcy Court for the: Northern District of: Illinois (State)		
Case number (if known)	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Debra	
		First name	First name
	Write the name that is on your government-issued	J.	
	picture identification (for	Middle name	Middle name
	example, your driver's license or passport	Olson	Lest name
		Last name	Last name
	Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
_	have used in the last	First name	First name
	8 years		
	Include your married or	Middle name	Middle name
	maiden names.	Lastrania	Lastrona
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your Social	XXX - XX- 6098	XXX - XX-
	Security number or federal Individual	OR	OR
	Taxpayer	9 xx - xx-	9 xx - xx-
	Identification number (ITIN)		

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De	ebtor 1 Debra First Name	J. Olson Middle Name Last Name	Case number (if known)
	oc.rtaine	Initial Citatio	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
Identification Numbers (EIN) you have used in the last		Business name	Business name
	8 years	Business name	Business name
	Include trade names and doing business as names	EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		660 Oldsmar Lane Number Street	Number Street
		Park City Illinois 60085 City State Zip Code	City State Zip Code
		Lake	City State Zip Gode
		County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
		City State Zip Code	City State Zip Code
_		City State Zip Code	City State Zip Gode
6.	Why you are choosing this district	Check one:	Check one:
	to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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Debtor 1 Debra	J.	Olson	Case number (if kno	wn)
First Name	Middle Name	Last Name		
Part 2: Tell the Court Ab	out Your Bankruptcy C	ase		
7. The chapter of the Bankruptcy Code you are choosing to file under		description of each, see <i>Notice Req</i> 0)). Also, go to the top of page 1 and		
8. How you will pay the fee	more details about cashier's check, or may pay with a cree I need to pay the f Individuals to Pay I request that my fi judge may, but is n the official poverty you choose this op	how you may pay. Typically, if you money order If your attorney is dit card or check with a pre-print fee in installments. If you choose Your Filing Fee in Installments (Coffee be waived (You may request not required to, waive your fee, and line that applies to your family significant or the state of	ou are paying the submitting your ed address. ethis option, sign official Form 103 this option only ad may do so onlize and you are u	
9. Have you filed for bankruptcy within the last 8 years?	Yes. District District District	WhenWhenWhen	MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY	Case number Case number Case number
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	✓ No. Yes. Debtor District Debtor District	<u>W</u> hen	MM / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known
11. Do you rent your residence?	✓ No. Go to			you want to stay in your residence? st You (Form 101A) and file it with

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Debtor 1 Debra		J.		Olson	Case number (if know	vn)	
First Name				Last Name			
Part 3: Report About Any	Busir	nesses	S You Own as a Sole	Proprietor			
12. Are you a sole proprietor of any full-	✓	No.	Go to Part 4.				
or part-time business?		Yes.	Name and location of	f business			
A sole proprietorship is a business you			Name of business, if a	any		_	
operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Number	Street			
If you have more than City State Zip Code one sole				Zip Code			
proprietorship, use a separate sheet and	Check the appropriate box to describe your business:						
attach it to this		Health Care Business (as defined in 11 U.S.C. § 101(27A))					
petition.		Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))					
		Stockbroker (as defined in 11 U.S.C. § 101(53A))					
			Commodity Br	roker (as defined in	11 U.S.C. § 101(6))		
			None of the ab	oove			
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). Part 4: Report if You Own	appi shee exist	ropriate t, state t, follow No. No. Yes.	e deadlines. If you indice ment of operations, case the procedure in 11 U I am not filing under Chap Bankruptcy Code. I am filing under Chap Code.	cate that you are a sish-flow statement, a l.S.C. § 11 16(1)(B). Chapter 11. pter 11, but I am Nupter 11 and I am a	small business debtor, you and federal income tax re on the small business debto	Il business debtor so that it can set u must attach your most recent balance turn or if any of these documents do not not according to the definition in the cording to the definition in the Bankrup diate Attention	not
14. Do you own or have		No					
any property that poses or is alleged to		No. Yes.	What is the hazard?				
pose a threat of imminent and identifiable hazard to			If immediate attention is	needed, why is it ne	eded?		
public health or safety? Or do you			Where is the property?				
own any property that needs immediate attention?				Number	Street		
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?				City	State	Zip Code	

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 Debtor 1 First Name
 Debra
 J.
 Olson
 Case number (if known)

 Last Name
 Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling						
	About Debtor 1:		About Debtor 2 (Sp	oouse Only in a Joint Case):		
15. Tell the court	You must check one:		You must check one:			
whether you have received briefing about credit counseling.	counseling ager	fing from an approved credit ncy within the 180 days before I aptcy petition, and I received a mpletion.	counseling ager	fing from an approved credit ncy within the 180 days before I aptcy petition, and I received a appletion.		
The law requires that you receive a briefing		the certificate and the payment plan, eveloped with the agency.		the certificate and the payment plan, veloped with the agency.		
about credit counseling before you file for bankruptcy. You must truthfully	counseling ager	fing from an approved credit ncy within the 180 days before I aptcy petition, but I do not have a mpletion.	counseling ager	fing from an approved credit ncy within the 180 days before I uptcy petition, but I do not have a mpletion.		
check one of the following choices. If you cannot do so, you are not eligible to file.		ter you file this bankruptcy petition, copy of the certificate and payment		er you file this bankruptcy petition, copy of the certificate and payment		
If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your	from an approve obtain those ser made my reques	I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.		ked for credit counseling services ed agency, but was unable to rvices during the 7 days after I st, and exigent circumstances emporary waiver of the		
creditors can begin collection activities again.	requirement, atta efforts you made unable to obtain i	ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were t before you filed for bankruptcy, and umstances required you to file this	requirement, atta efforts you made unable to obtain i	ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were t before you filed for bankruptcy, and umstances required you to file this		
		e dismissed if the court is dissatisfied for not receiving a briefing before ruptcy.		e dismissed if the court is dissatisfied for not receiving a briefing before ruptcy.		
	receive a briefing must file a certifica with a copy of the	sfied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along a payment plan you developed, if any. o, your case may be dismissed.	receive a briefing must file a certific with a copy of the	sfied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along a payment plan you developed, if any. o, your case may be dismissed.		
		the 30-day deadline is granted only imited to a maximum of 15 days.	Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit counseling because of:			
	I am not require counseling beca	d to receive a briefing about credit ause of:				
	Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.	☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		
	Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.	Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.		
	Active duty.	I am currently on active military duty in a military combat zone.	Active duty.	I am currently on active military duty in a military combat zone.		
	about credit cour	are not required to receive a briefing nseling, you must file a motion for ounseling with the court.	about credit cour	are not required to receive a briefing seling, you must file a motion for ounseling with the court.		

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Debtor 1 Debra First Name		son Case r	number (if known)
	estions for Reporting Purposes	st name	
16. What kind of debts do you have?	16a. Are your debts primarily of "incurred by an individual property No. Go to line 16b. ✓ Yes. Go to line 17. 16b. Are your debts primarily by	orimarily for a personal, fami ousiness debts? Business of vestment or through the ope	debts are debts that you incurred to obtain eration of the business or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that full No.		y exempt property is excluded and administrative te to unsecured creditors?
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 m \$10,000,001-\$50 m \$50,000,001-\$100 \$100,000,001-\$50	million \$1,000,000,001-\$10 billion million \$10,000,000,001-\$50 billion
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 m \$10,000,001-\$50 m \$50,000,001-\$100 \$100,000,001-\$50	million \$1,000,000,001-\$10 billion 0 million \$10,000,000,001-\$50 billion
Part 7: Sign Below			
For you	correct. If I have chosen to file under Chaof title 11, United States Code. I under Chapter 7. If no attorney represents me and	apter 7, I am aware that I may understand the relief availat I did not pay or agree to pay	perjury that the information provided is true and proceed, if eligible, under Chapter 7, 11,12, or 13 ple under each chapter, and I choose to proceed proceed proceed with the second proceed proceed by 11,111,50, 5, 242(b)
	I understand making a false state connection with a bankruptcy ca both. 18 U.S.C. §§ 152, 1341, 15	n the chapter of title 11, Uni ement, concealing property, se can result in fines up to \$	ted States Code, specified in this petition. or obtaining money or property by fraud in \$250,000, or imprisonment for up to 20 years, or
	Signature of Debtor 1 Executed on 4/10/2017		Signature of Debtor 2 Executed on
	MM / DD /	YYYYY	MM / DD / YYYY

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Debtor 1 Debra	J.	Olson	Case number (if	known)				
First Name	Middle Name	Last Name						
For your attorney, if you are represented by one	eligibility to proceed un	der Chapter 7, 11, 12	2, or 13 of title 11, United	ave informed the debtor(s) about d States Code, and have explained the also certify that I have delivered to the				
If you are not	debtor(s) the notice requ	uired by 11 U.S.C. §	342(b) and, in a case in v	which § 707(b)(4)(D) applies, certify that I				
represented by an	have no knowledge afte	ave no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.						
attorney, you do not	4.5	. ,		·				
need to file this page.	/s/ Nathan Delman		Date	4/10/2017				
	Signature of Attorney	for Debtor	M	M / DD / YYYY				
	Nathan Delman							
	Printed name							
	Semrad Law Firm							
	Firm name							
	5101 Washington Str	eet						
	Street							
	Unit 29							
	Gumee		Illinois	60031				
	City		State	Zip Code				
	Contact phone	3124473700	Email address	ndelman@semradlaw.com				
	6296205		Illinois	<u> </u>				
	Bar number		State					

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Fill in this infor	mation to identify your c	ase:	
Debtor 1	Debra	J.	Olson
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	Northern	District of Illinois
			(State)
Case number (If known)			

	Check if	this	is	an
_	amende	d filir	ng	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B)	\$4,500.00
1a. Copy line 55, Total real estate, from Schedule A/B	-
1b. Copy line 62, Total personal property, from Schedule A/B	\$4,027.50
1c. Copy line 63, Total of all property on Schedule A/B	\$8,527.50
art 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$9,100.00
Your total liabilities	\$9,100.00
Your total liabilities art 3: Summarize Your Income and Expenses	\$9,100.00
. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$590.00
. Schedule J: Your Expenses (Official Form 106J)	\$585.00

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Olson Debtor 1 Debra Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$0.00 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$0.00

9g. Total. Add lines 9a through 9f.

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Fill in this	information to identify your ca	ase:				
Debtor 1	Debra	J.	Olson			
Debtor 2	First Name	Middle Name	e Last Name			
(Spouse, if fi	ling) First Name	Middle Name	e Last Name			
United Sta	ates Bankruptcy Court for the:	Northern	District of Illinois (State)			
Case num	nber		(Otato)			
Officia	al Form 106A/B					Check if this is an amended filing
Sche	dule A/B: Prope	rty				12/1
category v responsibl write your	ategory, separately list and d where you think it fits best. E le for supplying correct infor name and case number (if k	Be as complete and a mation. If more spac nown). Answer every	accurate as possible. If e is needed, attach a s r question.	two married people a separate sheet to this	re filing together, both a form. On the top of any a	re equally
	Describe Each Residenc	<u> </u>				
1. Do you	a own or have any legal or e q No. Go to Part 2	uitable interest in a	ny residence, building,	land, or similar proper	ty?	
	Yes. Where is the property?					
1.1	1970 Topper Mobile Home Street address, if available, or 660 Oldsmar		hat is the property? Ch Single-family home Duplex or multi-unit bu		the amount of any secu	claims or exemptions. Put ired claims on <i>Schedule D:</i> hims Secured by Property.
	Number Street		Condominium or coop Manufactured or mobil	erative	Current value of the entire property? \$9000.00	Current value of the portion you own? \$4500.00
	Park City Illinois City State Lake County	60085 Zip Code	Land Investment property Timeshare		Describe the nature o interest (such as fee s the entireties, or a life	simple, tenancy by
	County	L	Other		Check if this is co	mmunity property
		W or	ho has an interest in th ie.	ne property? Check	(see instructions)	
			Debtor 1 only			
			Debtor 2 only Debtor 1 and Debtor 2	only		
		_ ~	At least one of the deb	•		
		pr	ether information you wi operty identification Imber:	sh to add about this it	em, such as local	
If you	own or have more than one, lis					
1.2	Street address, if available, or o	Г	hat is the property? Ch Single-family home Duplex or multi-unit bu		the amount of any secu	claims or exemptions. Put ared claims on Schedule D: nims Secured by Property.
		<u> </u>	Condominium or coop Manufactured or mobil		Current value of the entire property?	Current value of the portion you own?
	Number Street		Land Investment property Timeshare		Describe the nature o interest (such as fee s the entireties, or a life	simple, tenancy by
	City State	Zip Code Word	other	only	Check if this is co (see instructions)	ommunity property
			ther information you wi operty identification n		em, such as local	

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	Debra First Name	J. Middle Name	Olson Case numb	er (if known)	
.3	eet address, if available, or o	other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	the amount of any secu	claims or exemptions. Put ired claims on Schedule D. aims Secured by Property. Current value of the portion you own?
Nui	mber Street y State	Zip Code	Land Investment property Timeshare Other	Describe the nature of interest (such as fee sthe entireties, or a life	simple, tenancy by e estate), if known.
			Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item property identification number:	(see instructions)	ommunity property
	the dollar value of the pave attached for Part 1. V		all of your entries from Part 1, including any entri here. 	es for pages \$45	500.00
you ov u own t Cars, va		or equitable interes	st in any vehicles, whether they are registered or r also report it on Schedule G: Executory Contracts and	-	
✓ Ye	0	utility vehicles, moto		· 	
3.1	o es Make Model: Year:	Mercury Montego 2007		Do not deduct secured the amount of any sec	ured claims on <i>Schedule L</i>
	o es Make Model:	Mercury Montego	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured the amount of any sec	ured claims on <i>Schedule L</i>
3.1	o es Make Model: Year: Approximate mileage:	Mercury Montego 2007	who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	Do not deduct secured the amount of any sec Creditors Who Have Cl. Current value of the entire property? \$4783.00 Do not deduct secured the amount of any sec	portion you own?

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otor i	Debra	J.	Olson	Case number	EI (// K//OW/I)		
	First Name	Middle Name	Last Name				
3.3	Make		Who has an interest in the pr	roperty? Check	Do not deduct secured	· ·	
	Model:		one.		the amount of any secu		
	Year:		Debtor 1 only		Creditors with mave Cia	nims Secured by Property	
	Approximate mileage:		Debtor 2 only		Current value of the	Current value of the	
	Other information:		Debtor 1 and Debtor 2 only	/	entire property?	portion you own?	
			At least one of the debtors	and another			
			Check if this is communi	tv property (see			
			instructions)	, p p , (e			
3.4	Make		Who has an interest in the p	roperty? Check	Do not deduct secured	claims or exemptions. P	
	Model:		one.			cured claims on <i>Schedule</i> i	
	Year:		Debtor 1 only		Creditors Who Have Cla	aims Secured by Property	
	Approximate mileage:		Debtor 2 only		Current value of the	Current value of the	
	Other information:		Debtor 1 and Debtor 2 only	/	entire property?	portion you own?	
			At least one of the debtors	and another			
			Check if this is communi	tv property (see			
				., p. op o, (eee			
Exar			instructions) ner recreational vehicles, other version of the state o				
Exar	nples: Boats, trailers, motor No Yes Make		ner recreational vehicles, other ventry ft, fishing vessels, snowmobiles, m Who has an interest in the pi	otorcycle accessor	Do not deduct secured	•	
Exar	nples: Boats, trailers, motor No Yes		ther recreational vehicles, other vents, fishing vessels, snowmobiles, m Who has an interest in the prone.	otorcycle accessor	Do not deduct secured the amount of any secu	red claims on <i>Schedule</i>	
Exar	nples: Boats, trailers, motor No Yes Make Model:		who has an interest in the prone. Debtor 1 only	otorcycle accessor	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule ims Secured by Propert	
Exar	nples: Boats, trailers, motor No Yes Make Model: Year: Approximate mileage:		who has an interest in the prone. Debtor 1 only Debtor 2 only	otorcycle accessor	Do not deduct secured the amount of any secu Creditors Who Have Cla	rred claims on Schedule nims Secured by Propert Current value of the	
Exar	nples: Boats, trailers, motor No Yes Make Model: Year:		who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	otorcycle accessor roperty? Check	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule ims Secured by Propert	
Exar	nples: Boats, trailers, motor No Yes Make Model: Year: Approximate mileage:		who has an interest in the prone. Debtor 1 only Debtor 2 only	otorcycle accessor roperty? Check	Do not deduct secured the amount of any secu Creditors Who Have Cla	ims Secured by Property Current value of the	
Exar	nples: Boats, trailers, motor No Yes Make Model: Year: Approximate mileage:		who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	otorcycle accessor roperty? Check , and another	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule nims Secured by Propert Current value of the	
4.1	nples: Boats, trailers, motor No Yes Make Model: Year: Approximate mileage:		who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communication.	roperty? Check and another ty property (see	Do not deduct secured the amount of any secu Creditors Who Have Cla	red claims on Schedule nims Secured by Property Current value of the	
4.1	nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model:		who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communications	roperty? Check and another ty property (see	Do not deduct secured the amount of any secu Creditors Who Have Clater Current value of the entire property? Do not deduct secured the amount of any secured.	red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. Fired claims on Schedule	
4.1	nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year:		who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communities instructions) Who has an interest in the prone.	roperty? Check and another ty property (see	Do not deduct secured the amount of any secu Creditors Who Have Clater Current value of the entire property? Do not deduct secured the amount of any secured.	red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. Fired claims on Schedule	
4.1	nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model:		who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communities instructions) Who has an interest in the prone.	roperty? Check and another ty property (see	Do not deduct secured the amount of any secu Creditors Who Have Clater Current value of the entire property? Do not deduct secured the amount of any secured.	red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. Fired claims on Schedule	
4.1	nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year:		who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communicinstructions) Who has an interest in the prone. Debtor 1 only	otorcycle accessor roperty? Check and another ty property (see roperty? Check	Do not deduct secured the amount of any secu Creditors Who Have Classian Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classian Creditors Who Have Classian Creditors	red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. Fired claims on Schedule hims Secured by Propert	
4.1	nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage:		who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communicinstructions) Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 2 only	roperty? Check and another ty property (see roperty? Check	Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the	red claims on Schedule hims Secured by Property Current value of the portion you own? claims or exemptions. Pared claims on Schedule hims Secured by Property Current value of the	
4.1	nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage:		who has an interest in the prone. Debtor 1 only Debtor 2 only At least one of the debtors Check if this is communitinstructions) Who has an interest in the prone. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only	roperty? Check and another ty property (see roperty? Check	Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the	red claims on Schedule hims Secured by Property Current value of the portion you own? claims or exemptions. Pared claims on Schedule hims Secured by Property Current value of the	

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De	ebtor 1	Debra First Name	J. Middle Name	Olson Last Name	Case number (if known)	
Pa	rt 3:		our Personal and Household It			
D	o you	own or hav	e any legal or equitable interes	st in any of the followi	ng items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	Examp	_	and furnishings liances, furniture, linens, china, kitche	nware		
<u> </u>	No Yes. [Describe	Used Furniture			\$600.00
		tronics bles: Television	s and radios; audio, video, stereo, and	d digital equipment; compu	ters, printers, scanners; music	
✓		Describe	x2 televisions			\$200.00
		•	ue ind figurines; paintings, prints, or othe in, or baseball card collections; other	-	=	
✓	No Yes. I	Describe				
		oles: Sports, ph	rts and hobbies otographic, exercise, and other hobb s; carpentry tools; musical instrument		I tables, golf clubs, skis; canoes	
✓	No Yes. [Describe				
	0. Fire Examp		es, shotguns, ammunition, and relate	ed equipment		
V	No		oo, onotgano, anniamion, and rolato	a squipmont		
	Yes. [Describe				·
	1. Clo		clothes, furs, leather coats, designer w	vear, shoes, accessories		
	No					
✓	Yes. [Describe	Used Clothing			\$250.00
		-	ewelry, costume jewelry, engagement r	t rings, wedding rings, heirld	oom jewelry, watches, gems,	
	No Yes. [Describe				
		n-farm animal bles: Dogs, cats	s, birds, horses			
✓	No Yes. [Describe				
 •			al and household items you did as	t alroady list including a	ny hoalth aide yeu did not list	
ı √	4. Any No	, other persor	al and household items you did no	ic aiready list, including a	ny nearth aius you did not iist	
	Yes. [Describe				
			lue of all of your entries from Part number here	3, including any entries f	or pages you have attached	\$1050.00

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Debtor 1 Debra Olson Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ✓ Yes \$70.00 Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$516.00 17.1. Checking account: Chase Bank 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture % of ownership: Name of entity Yes. Give specific information about

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Deb	tor 1 Debra	J.	Olson	Case number (if known)	
	First Name	Middle Name	Last Name		
20.	Negotiable instruments i	orate bonds and other negotial include personal checks, cashiers ents are those you cannot transfe	checks, promissory n	otes, and money orders.	
	Yes. Give specific information about them	Issuer name:			
21.	Retirement or pension		thrift savings accoun	ts, or other pension or profit-sharing plans	
		in, Emon, Reogn, 40 (k), 400(b)	,, tillit savings accoun	its, or other pension or profit-straining plans	
	No	Type of account:	Institution name:		
	Yes. List each account		mondation mains.		
	separately.	401(k) or similar plan:			. —
		Pension plan:			
		IRA:			
		Retirement account:	-		
					. ———
		Keogh:			. —
		Additional account:			
		Additional account:			
22.	Examples: Agreements vicompanies, or others	prepayments I deposits you have made so that with landlords, prepaid rent, publi			
	✓ No		mondation name.		
	Yes	Electric:			. ———
		Gas:			. ———
		Heating oil:			
		Security deposit on rental unit:			
		Prepaid rent:			
		Telephone:			
		Water:			
		Rented furniture:			
		Other:			
23.	Annuities (A contract fo	or a periodic payment of money to	you, either for life or f	or a number of years)	
	✓ No	, , ,	• ,	, ,	
		Issuer name and description:			
	Yes				
		-			

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Debt	tor 1 Debra	J.	Olson	Case number (if known)	
	First Name	Middle Nam			
24.		lucation IRA, in an accou b)(1), 529A(b), and 529(b)(ınder a qualified state tuition program.	
	✓ No Inst	itution name and descriptio	n. Separately file the records of any int	erests.11 U.S.C. § 521(c):	
	_				
25.			perty (other than anything listed in	line 1), and rights or powers	
	exercisable for yo	our benefit			
	Yes. Describe.				
26.			crets, and other intellectual proper proceeds from royalties and licensing a		
	No Yes. Describe.				
0.7					
27.	Examples: Building	ses, and other general into permits, exclusive licenses	tangibles , cooperative association holdings, liqu	uor licenses, professional licenses	
	✓ No Yes. Describe.				
Moi	ney or property o	wed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	ney or property of the control of th				portion you own?
					portion you own? Do not deduct secured
	Tax refunds owed No Yes. Give speci	to you		Federal:	portion you own? Do not deduct secured
	Tax refunds owed No Yes. Give speciabout the you already	to you fic information m, including whether dy filed the returns		Federal: State:	portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed No Yes. Give speciabout the you alread and the tax	to you fic information m, including whether			portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds owed No Yes. Give speciabout the you alread and the ta Family support Examples: Past due	fic information m, including whether dy filed the returns ax years	usal support, child support, maintena	State:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owed No Yes. Give speciabout the you alread and the ta Family support Examples: Past due	fic information m, including whether dy filed the returns ax years	usal support, child support, maintena	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owed No Yes. Give speciabout the you alread and the ta Family support Examples: Past due	fic information m, including whether dy filed the returns ax years	usal support, child support, maintena	State: Local: nce, divorce settlement, property settlemen	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owed No Yes. Give speciabout the you alread and the ta Family support Examples: Past due	fic information m, including whether dy filed the returns ax years	usal support, child support, maintena	State: Local: nce, divorce settlement, property settlemen Alimony:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t
28.	Tax refunds owed No Yes. Give speciabout the you alread and the ta Family support Examples: Past due	fic information m, including whether dy filed the returns ax years	usal support, child support, maintena	State: Local: nce, divorce settlement, property settlement Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00
29.	Tax refunds owed ✓ No Yes. Give speciabout the you alread and the ta Family support Examples: Past due ✓ No Yes. Give special	fic information m, including whether dy filed the returns ax years or lump sum alimony, spo	usal support, child support, maintena	State: Local: nce, divorce settlement, property settlemen Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00
29.	Tax refunds owed ✓ No ☐ Yes. Give speciabout the you alread and the ta Family support Examples: Past due ✓ No ☐ Yes. Give special Other amounts so Examples: Unpaid w	fic information m, including whether dy filed the returns ax years or lump sum alimony, spo fic information		State: Local: Alimony: Maintenance: Support: Divorce settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds owed ✓ No Yes. Give speciabout the you alread and the tax Family support Examples: Past due ✓ No Yes. Give special ✓ No Other amounts so Examples: Unpaid was Social Section.	fic information m, including whether dy filed the returns ax years or lump sum alimony, spo fic information	payments, disability benefits, sick pay,	State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds owed No Yes. Give speciabout the you alread and the ta Family support Examples: Past due No Yes. Give special Other amounts so Examples: Unpaid was Social Se	fic information m, including whether dy filed the returns ax years or lump sum alimony, spo fic information	payments, disability benefits, sick pay,	State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	tor 1 Debra	J.	Olson	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance Examples: Health, disabi		avings account (HSA); credit,	nomeowner's, or renter's insurance	
	Yes. Name the insur of each policy and li	ance company	mpany name:	Beneficiary:	Surrender or refund value:
32.				cy, or are currently entitled to receive	
	Yes. Describe				
33.		arties, whether or not you poloyment disputes, insuranc	nave filed a lawsuit or made e claims, or rights to sue	a demand for payment	
34.	Other contingent and to set off claims	unliquidated claims of eve	y nature, including counter	claims of the debtor and rights	
	No Yes. Describe				
35.	Any financial assets yo	ou did not already list			
	Ves. Describe				
36.		-	rt 4, including any entries f	or pages you have attached	\$586.00
Part	5: Describe Any Bu	ısiness-Related Proper	ty You Own or Have an I	nterest In. List any real estate in Part	1.
37.	Do you own or have an	y legal or equitable intere	st in any business-related p	roperty?	
	No. Go to Part 6. Yes. Go to line 38.			pe De	urrent value of the ortion you own? o not deduct secured claims exemptions
38.		r commissions you already	earned		
	Yes. Describe				
39.	Office equipment, furn Examples: Business-rela		dems, printers, copiers, fax m	achines, rugs, telephones, desks, chairs, electr	onic devices
	✓ No ☐ Yes. Describe				

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Deb	tor 1 Debra	J.	Olson	Case number (if known)	
	First Name	Middle Name	Last Name		
40.	Machinery, fixtures, e	equipment, supplies you	use in business, and tools of yo	ur trade	
	✓ No				
	Yes. Describe				
	_				
41.	Inventory				
	✓ No				
	Yes. Describe				
	_				
40	Interests in partnersh	ing or igint vantures			
42.		iips or joint ventures			
	✓ No		Name of entity:	% of ownership:	
	Yes. Give specific		rame or oracy.	70 of Gwildians.	
	information about them				<u> </u>
	urom				
				· ·	
12	Customor lists mailing	lists, or other compilati	ons		
45.		insts, or other complian	ons		
	✓ No				
	Yes. Do your lists i	nclude personally identifial	ble information (as defined in 11 L	J.S.C. § 101(41A))?	
	☐ No				
	Yes. Desc	ribe			
44.	Any business-related	property you did not alre	eady list		
	✓ No				
	Yes. Give specific				_
	information				<u> </u>
					_
					<u> </u>
			art 5, including any entries for		
•	art 5. Write that humbe	51 Here			
Part	Describe Any F	arm- and Commercia	I Fishing-Related Property	You Own or Have an Interest In.	
	If you own or have ar	interest in farmland, list it in	n Part 1.		
46.	Do you own or have a	ny legal or equitable int	erest in any farm- or commerc	al fishing-related property?	
	No. Go to Part 7.				Current value of the
	Yes. Go to line 47.				portion you own? Do not deduct secured claims
					or exemptions
47.	Farm animals				
	Examples: Livestock, p	oultry, farm-raised fish			
	✓ No				
	Yes. Describe				

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Debt	tor 1 Debra First Name	J. Middle Name	Olson Last Name	Case number (if known)	
48.	Crops-either growing	or harvested			
	No Yes. Describe				
49.	Farm and fishing equ	pment, implements, machinery, fix	tures, and tools of t	rade	
	✓ No				
	Yes. Describe				
50.	Farm and fishing supp	blies, chemicals, and feed			
	✓ No				
	Yes. Describe				
51.	Any farm- and comme	ercial fishing-related property you o	did not already list		
	✓ No				
	Yes. Describe				
50 A	dal Alexa dell'en contro af e	U of common and since from Don't C in also	di		
		III of your entries from Part 6, incluer here	ung any entries for	pages you have attached	
				L	
	_				
Part		operty You Own or Have an Int		Did Not List Above	
53.		perty of any kind you did not alreats, country club membership	ay list?		
	✓ No				
	Yes. Give specific information				
54. A	dd the dollar value of a	all of your entries from Part 7. Write	that number here .		
Part	8: List the Totals of	of Each Part of this Form			
				>	\$4500.00
	part 2 total vehicles, li				
-		nd household items, line 15	\$2391.50		
	eart 4: Total financial a		\$1050.00 \$586.00		
59. F	Part 5: Total business-	related property, line 45	\$380.00		
60. F	Part 6: Total farm- and	fishing-related property, line 52			
61. F	Part 7: Total other prop	perty not listed, line 54			
62.1	Total personal property	Add lines 56 through 61	····· \$4027.50	Copy personal presents total	+ \$4027.50
				Copy personal property total ►	#0507.50
63. T	otal of all property on	Schedule A/B. Add line 55 + line 62			<u>\$8527.50</u>

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Fill in this infor	mation to identify your c	ase:		
Debtor 1	Debra	J.	Olson	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number (If known)				

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pai	t 1: Identify the Property You Claim	as Exempt		
1.	Which set of exemptions are you claiming ✓ You are claiming state and federal n ✓ You are claiming federal exemptions For any property you list on Schedule A/	onbankruptcy exemp	otions. 11 U.S.C. § 522(b)(3)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
	Brief description: 660 Oldsmar, Park City, IL 60085 Line from Schedule A/B: 01	\$4,500.00	\$4,500.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-901
	Brief description: Mercury Montego, 2007 Line from Schedule A/B: 03	\$2,391.50	\$2,391.50 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)
3.	✓ No	ry 3 years after that for o	375? cases filed on or after the date of adjustment.) rithin 1,215 days before you filed this case?	

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Debtor 1 Debra Olson Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you property own Check only one box for each exemption. Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$516.00 description: **✓** \$516.00 Checking account, 100% of fair market value, up to any Chase Bank applicable statutory limit Line from Schedule A/B: 17 735 ILCS 5/12-1001(b) Brief \$600.00 description: **✓** \$600.00 **Used Furniture** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 06 735 ILCS 5/12-1001(a) Brief \$250.00 description: \$250.00 **Used Clothing** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) \$200.00 description: **✓** \$200.00 x2 televisions 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$70.00 description: \$70.00

100% of fair market value, up to any

applicable statutory limit

Cash

Schedule A/B:

16

Line from

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				_		
Fill in this info	ormation to identify your ca	ase:				
Debtor 1	Debra	J.	Olson			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	Northern	District of Illinois			
			(State)			
Case numbe (If known)	r					
Official	Form 106D			J		Check if this is an amended filing
Sched	ule D: Credit	ors Who Ha	ve Claims Secure	ed by Prop	erty	12/15
more space i	-		e are filing together, both are equ nber the entries, and attach it to t	•		
1. Do any	creditors have claims s	ecured by your proper	ty?			
✓ No	. Check this box and subr	mit this form to the court v	with your other schedules. You hav	e nothing else to repo	ort on this form.	
☐ Ye	s. Fill in all of the informatio	on below.	•			
Part 1: Lis	at All Secured Claims					
			red claim, list the creditor separately list the other creditors in Part 2. As	Column A	Column B	Column C
	s possible, list the claims in			Amount of claim Do not deduct the	Value of collateral that supports	Unsecured portion

this claim

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Fill i	n this inforr	mation to identify your c	ase:			
Deb	tor 1	Debra	J.	Olson		
		First Name	Middle Name	Last Name		
	otor 2 use, if filing)	First Name a	Middle Ness	I and Marina		
(Spo	use, ii iiiirig)	First Name	Middle Name	Last Name		
Unit	ted States B	Sankruptcy Court for the:	Northern	District of Illinois		
Cas	e number			(State)		
(If kn						
Off	ficial F	orm 106E/F				Check if this is an amended filing
						_
50	chedi	lie E/F: Cre	editors Who	Have Unsec	ured Claims	12/1
othe Form clain	r party to a n 106A/B) a ns that are entries in tl	any executory contracts and on Schedule G: Exe e listed in Schedule D: C	s or unexpired leases that ecutory Contracts and Une Creditors Who Hold Claims	t could result in a claim. Al expired Leases (Official For s Secured by Property. If m	so list executory contracts rm 106G). Do not include ar ore space is needed, copy t	n NONPRIORITY claims. List the on Schedule A/B: Property (Official by creditors with partially secured the Part you need, fill it out, number rite your name and case number (if
Par	t 1: List	All of Your PRIORIT	Y Unsecured Claims			
1.	Do any cr	reditors have priority ur	nsecured claims against y	ou?		
	✓ No. 0	Go to Part 2.				
	Yes.					
	L Tes.					

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Nonpriority

amount

Total

claim

Priority

amount

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Debto		Debra First Name	J. Middle Name	Olson Last Name	Case number (if known)	
Part 2	2:	List All of Your NONPRIC				
3. [Do a	ny creditors have nonpriority No. You have nothing to repo Yes.	y unsecured claims agort in this part. Submit	gainst you? t this form to th	ne court with your other schedules.	
u It	ınse f mo	cured claim, list the creditor sep	parately for each claim.	For each claim	er of the creditor who holds each claim. If a creditor has more listed, identify what type of claim it is. Do not list claims already in Part 3.If you have more than four priority unsecured claims fill ou	cluded in Part 1.
	_					Total claim
4.1		st Buy/CBNA inpriority Creditor's Name			Last 4 digits of account number	\$1,000.00
	70	1 East 60th Street			When was the debt incurred?n/a	
	- Nu	mber Street			As of the date you file, the claim is: Check all that apply. Contingent	
	Sio	oux Falls South	n Dakota 57104		Unliquidated	
	Cit	y State	I	de	Disputed	
	Wh	no incurred the debt? Check of Debtor 1 only	one.		Type of NONPRIORITY unsecured claim:	
	È	Debtor 2 only			Student loans	
	Ė	Debtor 1 and Debtor 2 only			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	L	At least one of the debtors an	nd another		Debts to pension or profit-sharing plans, and other similar debts	
	L	Check if this claim relates	to a community debt		Other. Specify Credit Card	
	Is the claim subject to offset? No Yes					
4.2		PITAL ONE			Last 4 digits of account number 1024	\$5,266.00
	Nonpriority Creditor's Name P O Box 30253 Number Street				When was the debt incurred? 8/2014	
					As of the date you file, the claim is: Check all that apply.	
	Sal	It Lake City Utah	84130		Contingent	
	Cit	•	I	de	Unliquidated	
	Wh	no incurred the debt? Check of Debtor 1 only	one.		Disputed	
	Ė	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
		Debtor 1 and Debtor 2 only			Student loans	
		At least one of the debtors an	nd another		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
		1			Debts to pension or profit-sharing plans, and other similar	
	L ls i	Check if this claim relates the claim subject to offset?	to a community debt		debts Other. Specify CreditCard	
	√	No			<u> </u>	
	F	Yes				
4.3	CE	RTIFIED SERVICES INC			Last 4 digits of account number 56Q1	\$40.00
		npriority Creditor's Name			Last 4 digits of account number 56Q1 When was the debt incurred? 3/2011	
		33 WASHINGTON ST STE 2 mber Street				
					As of the date you file, the claim is: Check all that apply. Contingent	
	_	AUKEGAN Illinois			Unliquidated	
	City	y State no incurred the debt? Check		de	Disputed	
	▼	Debtor 1 only	one.		Type of NONPRIORITY unsecured claim:	
	Ē	Debtor 2 only			Student loans	
	F	Debtor 1 and Debtor 2 only			Obligations arising out of a separation agreement or	
	F	At least one of the debtors an	nd another		divorce that you did not report as priority claims	
	Ē	Check if this claim relates	to a community debt		Debts to pension or profit-sharing plans, and other similar debts	
	ls t	the claim subject to offset?	-		001 Collection; Collecting for	
	✓	No Yes			ORIGINAL CREDITOR: MEDICAL Other. Specify PAYMENT DATA	

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Debtor 1 Debra Olson Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 PROFESSIONAL PLACEMENT \$1,402.00 Last 4 digits of account number ____ Nonpriority Creditor's Name 272 N 12TH ST <u>8/</u>2012 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply.

		Contingent			
	MILWAUKEE Wisconsin 53233	- Unliquidated			
	City State Zip Code Who incurred the debt? Check one.	Disputed			
	Debtor 1 only	Type of NONPRIORITY unsecured claim:			
	Debtor 2 only	Student loans			
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or			
	At least one of the debtors and another	divorce that you did not report as priority claims			
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts			
	Is the claim subject to offset?	001 Collection; Collecting for ORIGINAL CREDITOR: MEDICAL			
	✓ No	Other. Specify PAYMENT DATA			
	Yes				
4.5	SYNCB/WALMAR	Last 4 digits of account number 5200	\$704.00		
	Nonpriority Creditor's Name PO BOX 965024	When was the debt incurred? 11/2016			
	Number Street	As of the date you file, the claim is: Check all that apply.			
		Contingent			
	EL PASO Texas 79998	Unliquidated			
	City State Zip Code Who incurred the debt? Check one.	Disputed			
	Debtor 1 only	Type of NONPRIORITY unsecured claim:			
	Debtor 2 only	Student loans			
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or			
	At least one of the debtors and another	divorce that you did not report as priority claims			
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts			
	Is the claim subject to offset?	✓ Other. Specify CreditCard			
	✓ No	_			
	Yes				
4.6	SYNCB/WALMART	- Last 4 digits of account number	\$688.00		
	Nonpriority Creditor's Name PO BOX 981400	When was the debt incurred? 11/2016			
	Number Street	As of the date you file, the claim is: Check all that apply.			
		Contingent			
	EL PASO Texas 79998	Unliquidated			
	City State Zip Code Who incurred the debt? Check one.	Disputed			
	Debtor 1 only	Type of NONPRIORITY unsecured claim:			
	Debtor 2 only	Student loans			
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or			
	At least one of the debtors and another	divorce that you did not report as priority claims			
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts			
	Is the claim subject to offset?	✓ Other. Specify CreditCard			
	✓ No				
	Yes				

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Debtor 1 Debra J. Olson Case number (if known)

First Nan	ne Middle Name Last Name		<u> </u>
Part 4: Add th	e Amounts for Each Type of Unsecured Claim		
	mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.	for s	statistical reporting purposes only. 28 U.S.C. §159.
			Total claims
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$0.00
	6b. Taxes and certain other debts you owe the government	6b.	
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$0.00
			Total claims
Total claims from Part 2	6f. Student loans	6f.	\$0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$9,100.00
	6i Total Add lines 6f through 6i	6i	\$9,100.00

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Fill in this information to identify your case:						
Debtor 1	Debra	J.	Olson			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		Northern	District of Illinois (State)			
Case number			(

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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				,	
Fill in this infor	mation to identify your c	ase:			
Debtor 1	Debra	J.	Olson		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States F	Bankruptcy Court for the:	Northern	District of Illinois		
Officed States L	bankiupicy Court for the.	Nottrein	(State)		
Case number (If known)	-				
<u> </u>					Check if this is ar
O.C 1	5 40011				amended filing
Official	Form 106H				
Schedul	e H: Your Cod	lehtors			12/15
No Yes 2. Within the Idaho, Lou	e last 8 years, have you uisiana, Nevada, New Mex Go to line 3.	ico, Puerto Rico, Texas, W	operty state or territor dashington, and Wiscons	y? (<i>Commui</i> sin.)	nity property states and territories include Arizona, California,
	• •	r spouse, or legal equiva	alent live with you at the	e time?	
	No		" 0		
Ш	Yes. In which communit	y state or territory did yo	u live?	Fill in t	the name and current address of that person.
	Name of your spouse, f	ormer spouse, or legal equ	ivalent		
	Number Street				
	City	State	Zip C	Code	
	•		•		ouse is filing with you. List the person shown in line 2 and the creditor on Schedule D (Official Form 106D),

Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

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					<u> </u>		
Fill in this informat	ion to identify	your case:					
Debtor 1 Debr	a	J.	Olson				
First I	Name	Middle Name	Last N	lame		Che	ock if this is:
Debtor 2 (Spouse, if filing) First I	Namo	Middle Name	Last N	lama		/	An amended filing
		Middle Name					A supplement showing post-petition chapter 13
United States Bankruthe:	uptcy Court for	Northern	_ District of III (S	inois State)			expenses as of the following date:
Case number (If known)						j	MM / DD / YYYY
Official For	n 106l						
Schedule I:	Your Inc	come					12/1
information about y spouse. If more spa number (if known).	our spouse. If ace is needed,	f you are separated and attach a separate shew question.	d your spou	se is	not filing w	th you, do	r spouse is living with you, include not include information about your ional pages, write your name and case
1. Fill in your emplo	oyment		Debtor 1	I			Debtor 2
information.		Employment status	Emplo	wod			Employed
If you have more attach a separate	•		✓ Not E	•	2d		Not Employed
information about employers.	•	Occupation	▼ Not E	прюу	au .		Not Employed
Include part time, self-employed wo		Employer's name					
Occupation may i or homemaker, if		Employer's address	Number St	reet			Number Street
			City		State	Zip Code	City State Zip Code
		How long employed there?					
Part 2: Give Del	ails About M	Ionthly Income					
spouse unless you a	are separated. ing spouse have	e more than one employer,					write \$0 in the space. Include your non-filing or that person on the lines below. If you need
more space, attach	a soparate snee	t to this form.			For Deb	tor 1	For Debtor 2 or non-filing spouse
		ry, and commissions (befor calculate what the monthly v		2.		\$0.00	
3. Estimate and I	ist monthly over	time pay.		3.		+ \$0.00	
4 0-1	s income. Add lir	ao 2 I lino 3		4.		\$0.00	

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Debtor	1Debra J.	Olson	Case number	(if	
	First Name Middle Name	Last Name	For Debtor 1	For Debtor 2 or non-filing spouse	
Copy	r line 4 here	→ 4	\$0.00		
	all payroll deductions:				
	Tax, Medicare, and Social Security deductions	5a.	\$0.00		
5b.	Mandatory contributions for retirement plans	5b.	\$0.00		
5c. \	Voluntary contributions for retirement plans	5c.	\$0.00		
5d.	Required repayments of retirement fund loans	5d.	\$0.00		
5e. l	nsurance	5e.	\$0.00		
5f. [Oomestic support obligations	5f.	\$0.00		
5g.	Union dues	5g.	\$0.00		
5h.	Other deductions. Specify:		\$0.00 +		
6. Add +5h.	the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5	5f + 5g 6.	\$0.00		
7. Calc	ulate total monthly take-home pay. Subtract line 6 from lin	e 4. 7.	\$0.00		
8. List	all other income regularly received:				
ı	Net income from rental property and from operating a pusiness, profession, or farm				
(Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	d 8a.	\$0.00		
8b.	Interest and dividends	8b.	\$0.00		
	Family support payments that you, a non-filing spouse, or dependent regularly receive	· a			
	nclude alimony, spousal support, child support, maintenance divorce settlement, and property settlement.	, 8c.	\$0.00		
8d.	Unemployment compensation	8d.	\$0.00		
8e. \$	Social Security	8e.	\$590.00		
I c u r	Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-eash assistance that you receive, such as food stamps (benefit under the Supplemental Nutrition Assistance Program) or lousing subsidies specify:		\$0.00		
9.0	Pension or retirement income	8f.	<u>\$0.00</u> \$0.00		
		8g. 8h. +	\$0.00 +		
	Other monthly income. Specify:				
9. Auu	all other modifie Add lifes da + db + dc + dd + de + df +dg	+ 011. 9.	\$590.00		
	culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing s	10. spouse	\$590.00 +	=	\$590.00
Inclu frien	te all other regular contributions to the expenses that you do contributions from an unmarried partner, members of you do or relatives. The include any amounts already included in lines 2-10 or amounts.	r household, your d	dependents, your roomm		
Spe	•	dints that are not a	valiable to pay expenses i	11. +	- \$0.00
<u>——</u>	ony.				Ψ0.00
	If the amount in the last column of line 10 to the amount a that amount on the Summary of Schedules and Statistical Statistica				\$590.00
					Combined monthly income
13. Do	you expect an increase or decrease within the year after	you file this form	?		
✓	No.				
	Yes. Explain:				

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		Doo	ument Page 31 of 6	3		
Fill in this infor	mation to identif	y your case:				
Debtor 1	Debra	J.	Olson			
Debtor 2	First Name	Middle Name	Last Name	Check if this is:		
(Spouse, if filing)	First Name	Middle Name	Last Name	An amended fili	ng	
United States E	Bankruptcy Court	for the: Northern	District of Illinois	A supplement s expenses as of		petition chapter 13
Case number			(State)			
(If known)				MM / DD / YYY	Y	
Official	Form 10	16J				
Schedul	e J: Your	Expenses				12/15
information. If (if known). Ans						
1. Is this a joi	nt case?					
✓ No. Go	o to line 2					
	oes Debtor 2 liv	e in a separate household?				
г	No					
	Yes. Debtor 2	must file Official Forms 106J-2, Exp	enses for Separate Household of Deb	tor 2.		
2. Do you hav	re dependents?	No				
Do not list Debtor 2.	Debtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2 Child	Dependent's age 22 years	Does depe with you? No. Yes.	endent live
	penses include of people other	✓ No				
than yourself an dependents	-	Yes				
Part 2: Esti	mate Your On	going Monthly Expenses				
•	of a date after th	your bankruptcy filing date unless ne bankruptcy is filed. If this is a su	, , , , , , , , , , , , , , , , , , , ,	•	•	
	•	h non-cash government assistance cluded it on Schedule I: Your Incom	-			Your expenses
	I or home owner or the ground or I	rship expenses for your residence. ot. 4.	Include first mortgage payments and		4.	\$0.00
	luded in line 4:					
4a. Real e	state taxes				4a	\$0.00

\$0.00

\$0.00

\$0.00

4b.

4c.

4d.

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Debra J. Olson Case number (if known)
First Name Middle Name Last Name

		Your expenses
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	\$51.00
6b. Water, sewer, garbage collection	6b.	\$0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$129.00
6d. Other. Specify:	6d	\$0.00
7. Food and housekeeping supplies	7.	\$290.00
8. Childcare and children's education costs	8.	\$0.00
9. Clothing, laundry, and dry cleaning	9.	\$40.00
10. Personal care products and services	10.	\$25.00
11. Medical and dental expenses	11.	\$0.00
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 	12.	\$50.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$0.00
14. Charitable contributions and religious donations	14.	\$0.00
15. Insurance.Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a	\$0.00
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance	15c	\$0.00
15d. Other insurance. Specify:	15d	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify:	16	\$0.00
17. Installment or lease payments:	.0	
17a. Car payments for Vehicle 1	17a	\$0.00
17b. Car payments for Vehicle 2	17b	\$0.00
17c. Other. Specify:	17c	\$0.00
17d. Other. Specify:	17d	\$0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from		\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19.Other payments you make to support others who do not live with you.		
Specify:	19.	\$0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property	200	\$0.00
20b. Real estate taxes.	20a 20b	\$0.00 \$0.00
20c. Property, homeowner's, or renter's insurance	20b 20c	\$0.00
20d. Maintenance, repair, and upkeep expenses.	200 20d	\$0.00
20e. Homeowner's association or condominium dues		
253. 15.155	20e	\$0.00

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Debtor 1 Debra		J.	Olson	Case number (if known)		
First I	Name	Middle Name	Last Name			
21. Other. Spe	cify:				21	\$0.00
	your monthly expenses	6.				\$585.00
	nes 4 through 21.			\$0.00		
. ,	` , ,	,, ,	from Official Form 106J-2			\$585.00
22c. Add lir	ne 22a and 22b. The resu	ult is your monthly exp	enses.		22.	
23. Calculate	your monthly net incon	ne.				
23a. Copy	line 12 (your combined n	nonthly income) from	Schedule I.		23a	\$590.00
23b. Copy	your monthly expenses f	from line 22 above.			23b	\$585.00
	act your monthly expense		ncome.			\$5.00
The re	esult is your monthly net	income.			23c	
	payment to increase or d	ecrease because of a r	oan within the year or do yonodification to the terms of	your mortgage?		

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Fill in this information to identify your case:						
Debtor 1	Debra	J.	Olson			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		Northern	District of Illinois (State)			
Case number			(,			

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below						
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?						
	✓ No						
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).					
	Under penalty of perjury, I declare that I have read the summary a that they are true and correct.	and schedules filed with this declaration and					
×	·	*					
	Signature of Debtor 1	Signature of Debtor 2					
	Date 4/10/2017	Date					
	MM/DD/YYYY	MM/DD/YYYY					

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			Boodmone	ago oo or c			
Fill in this info	rmation to identify your o	case:					
Debtor 1	Debra	J.	Olson				
Debtor 2	First Name	Middle Na	ne Last Nam	е			
(Spouse, if filing)	First Name	Middle Na	ne Last Nam	е			
United States	Bankruptcy Court for the:	Northern	District of Illino (State				
Case number (If known)							
	Form 107						Check if this is amended filing
	ent of Financia	al Affairs fo	r Individuals	Filing for E	3ankru	ptcy	12/
	ete and accurate as po						
	nown). Answer every q	•			•	1,1011,	,
Part 1: Give	e Details About Your	Marital Status a	nd Where You Lived	Before			
GII.		maritar otatao a		20.0.0			
1. What is	your current marital st	atus?					
☐ Ma	arried						
₩ No	t married						
_							
2. During	the last 3 years, have you lived anywhere other than where you live now?						
☐ No)						
✓ Ye	s. List all of the places yo	ou lived in the last 3	years. Do not include v	vhere you live now	<i>'</i> -		
De	btor 1:		Dates Debtor 1 lived	Debtor 2:			Dates Debtor 2 lived
			there				there
				Same as De	btor 1		Same as Debtor 1
26	001 N. Grand Oaks Ct			_			_
	021 N. Grand Oaks Ct mber Street		From <u>09/2013</u>	Number Street			From
			To <u>09/2016</u>				То
Gu	ırnee Illinois	60031					
Cit		Zip Code		City	State	Zip Code	
				Same as De	btor 1		Same as Debtor 1
Nu	mber Street		From	Number Street			From
	mber offeet		 To				
							<u> </u>
Cit	y State	Zip Code		City	State	Zip Code	
				•			
	ne last 8 years, did you e ories include Arizona, Califo	-					Community property states
		a, .aa.ro, Louisiai	,	. 30.10 11100, 10/40	,	, 111000110111.	· /
✓ No							
Yes.	Make sure you fill out S	chedule H: Your Co	debtors (Official Form	106H).			

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Case number (if known)

Olson

Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) Wages, Wages, From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and and exclusions) exclusions) Social Security \$2,280.00 From January 1 of current year until the date you filed for bankruptcy: Social Security \$6,840.00 For last calendar year: (January 1 to December 31, 2016 Social Security \$6,840.00 For the calendar year before that: (January 1 to December 31, 2015

Debtor 1 Debra

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Olson Debtor 1 Debra Case number (if known) Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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or 1	Debra		J.	Ols		Case number	(if known)
	First Name		Middle Name	Las	t Name		
nsio orp igei	ders include your porations of which	relatives; a n you are a for a busin	ny general partners n officer, director, p ess you operate as	s; relatives of any person in control,	general partners; part or owner of 20% or	nerships of which y more of their voting	who was an insider? You are a general partner; It is securities; and any managing It domestic support obligations,
✓	No						
	Yes. List all pay	ments to a	an insider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
_	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				
insi	der?		for bankruptcy, or ranteed or cosigne		y payments or trans	fer any property o	n account of a debt that benefited an
✓	No Yes. List all pay	ments that	t benefited an ins	ider.			
	. co. <u></u> o. u pay			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
	Insider's Name						mode dicator e name
	Number Street						
-	City	State	Zip Code				
	Insider's Name						
	Number Street						

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Olson Debtor 1 Debra Case number (if known) Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ◪ Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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Debt	tor 1 Debra	J.	Olson	Case number (if known)	
	First Name	Middle Name	Last Name		
11.	Within 90 days before you fi accounts or refuse to make			oank or financial institution, set off any am	ounts from your
	No Yes. Fill in the details.				
	_		Describe the action th	e creditor took Date action was taken	Amount
	Creditor's Name		-		
	Number Street		-		
			Last 4 digits of account	number: XXXX-	
	City State	Zip Code	-		
12.	Within 1 year before you file appointed receiver, a custo			possession of an assignee for the benefit of	of creditors, a court-
	✓ No ☐ Yes				
Part	5: List Certain Gifts and	I Contributions			
13.	Within 2 years before you f	iled for bankruptcy, di	d you give any gifts with a t	otal value of more than \$600 per person?	
	✓ No Yes. Fill in the details for	or each gift.			
	Gifts with a total value per person	of more than \$600	Describe the gifts	Dates you gave the gifts	Value
					_
	Person to Whom You Ga	ave the Gift	-		
	Number Street		-		
	City State	·	-		
	Person's relationship to y	, ou			
	Person to Whom You Ga	ave the Gift	- -		
	Number Street		-		
	City State	•	-		
	Person's relationship to y	ou .			

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	Debra	J.	Olson Ca	se number (if known)		
	First Name	Middle Name	Last Name			
. Wit	thin 2 years before you filed for	bankruptcy, did	you give any gifts or contributions wit	h a total value of	more than \$600	to any charity?
✓	l No					
H		aift or contribution	nn.			
Ш	Yes. Fill in the details for each	girt or contribution	JII.			
	Gifts or contributions to chari	ties	Describe what you contributed		Date you	Value
	that total more than \$600				contributed	
						·
	Charity's Name					
	•					
	Number Street					
	City State	Zip Code				
rt 6:	List Certain Losses					
gar	mbling?	ankruptcy or sin	ce you filed for bankruptcy, did you lo	se anything beca	use of theft, fire,	other disaster, or
✓	No					
	Yes. Fill in the details.					
	Describe the property you los	t and	Describe any insurance coverage	for the loss	Date of your	Value of property
	how the loss occurred		Include the amount that insurance h		loss	lost
			pending insurance claims on line 33	of Schedule		
			A/B: Property.			
	List Certain Payments or T					
	out seeking bankruptcy or prepalude any attorneys, bankruptcy pe		ccy petition? r credit counseling agencies for services r	equired in your ban	kruptcy.	
				equired in your ban	kruptcy.	
	lude any attorneys, bankruptcy pe			equired in your ban	kruptcy.	
□	lude any attorneys, bankruptcy pe		r credit counseling agencies for services r			Amount of
□	lude any attorneys, bankruptcy pe		r credit counseling agencies for services r Description and value of any prop		Date payment	Amount of
✓	lude any attorneys, bankruptcy pe		r credit counseling agencies for services r			Amount of payment
□	lude any attorneys, bankruptcy pe No Yes. Fill in the details.		r credit counseling agencies for services r Description and value of any prop transferred		Date payment or transfer was made	payment
□	lude any attorneys, bankruptcy pe		r credit counseling agencies for services r Description and value of any prop		Date payment or transfer	
□	lude any attorneys, bankruptcy pe No Yes. Fill in the details. Semrad Law Firm		r credit counseling agencies for services r Description and value of any prop transferred		Date payment or transfer was made	payment
□	lude any attorneys, bankruptcy pe No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid		r credit counseling agencies for services r Description and value of any prop transferred		Date payment or transfer was made	payment
□	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street		r credit counseling agencies for services r Description and value of any prop transferred		Date payment or transfer was made	payment
□	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor	tition preparers, o	r credit counseling agencies for services r Description and value of any prop transferred		Date payment or transfer was made	payment
□	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois	tition preparers, o	r credit counseling agencies for services r Description and value of any prop transferred		Date payment or transfer was made	payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor	tition preparers, o	r credit counseling agencies for services r Description and value of any prop transferred		Date payment or transfer was made	payment
□	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois	tition preparers, o	r credit counseling agencies for services r Description and value of any prop transferred		Date payment or transfer was made	payment
□	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None	60603 Zip Code	r credit counseling agencies for services r Description and value of any prop transferred		Date payment or transfer was made	payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address	60603 Zip Code	r credit counseling agencies for services r Description and value of any prop transferred		Date payment or transfer was made	payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None	60603 Zip Code	r credit counseling agencies for services r Description and value of any prop transferred		Date payment or transfer was made	payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None	60603 Zip Code	r credit counseling agencies for services r Description and value of any prop transferred		Date payment or transfer was made	payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment,	60603 Zip Code	r credit counseling agencies for services r Description and value of any prop transferred		Date payment or transfer was made	payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment,	60603 Zip Code	r credit counseling agencies for services r Description and value of any prop transferred		Date payment or transfer was made	payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment,	60603 Zip Code	r credit counseling agencies for services r Description and value of any prop transferred		Date payment or transfer was made	payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment,	60603 Zip Code	r credit counseling agencies for services r Description and value of any prop transferred		Date payment or transfer was made	payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment, Person Who Was Paid	60603 Zip Code	r credit counseling agencies for services r Description and value of any prop transferred		Date payment or transfer was made	payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment,	60603 Zip Code	r credit counseling agencies for services r Description and value of any prop transferred		Date payment or transfer was made	payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment, Person Who Was Paid	60603 Zip Code	r credit counseling agencies for services r Description and value of any prop transferred		Date payment or transfer was made	payment
	No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment, Person Who Was Paid Number Street	60603 Zip Code Zip Code	r credit counseling agencies for services r Description and value of any prop transferred		Date payment or transfer was made	payment

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Debto	r 1	Debra	J.	Olson	Case number (if known)		
		First Name	Middle Name	Last Name			
	help	nin 1 year before you filed for you deal with your credite not include any payment or to	ors or to make paym		ur behalf pay or transfer	any property to a	nyone who promised to
	✓	No Yes. Fill in the details.					
•				Description and value of ar transferred	ny property	Date payment or transfer was made	Amount of payment
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
1	the Incli	ordinary course of your bu	siness or financial at nd transfers made as s	security (such as the granting of a			
ı		Too. 1 III II To Godale.		Description and value of ar property transferred		/ property or ceived or debts p	Date aid transfer was made
		Person Who Received Trans	sfer				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person Who Received Trans	sfer				
		Number Street					
		City State Person's relationship to you	Zip Code				
ļ	ben	nin 10 years before you file eficiary? ese are often called asset-prot		d you transfer any property to a	self-settled trust or sim	ilar device of whic	ch you are a
ĺ		Yes. Fill in the details.		Description and value of t	he property transferred		Date transfer was made
		Name of trust					

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Olson Debtor 1 Debra _ Case number (if known) First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code City State Zip Code

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Deb	tor 1			Olson	Case	se number (if known)	
		First Name Middle Name	L	ast Name			
Part	9:	dentify Property You Hold or Control	for Someor	ne Else			
		, ., ., .,					
23.	Do v	ou hold or control any property that someo	ne else owns	s? Include an	, property you be	orrowed from, are storing for, or hold in	trust for
	-	eone.			, , , , , , , , , , , , , , , , , , , ,	3 . ,	
	$\overline{\mathbf{V}}$	No					
	П	Yes. Fill in the details.					
			Whore is t	the property?		Describe the contents	Value
			Wilele 13	ine property:		Describe the contents	Value
		Owner's Name	NumberSt	root	-		
		Owner 3 Name	Numberou	icci			
		Number Street					
		Number Circle					
			City	State	Zip Code		
			City	State	Zip Code		
		City State Zip Code					
		,					
Part	10:	Give Details About Environmental Inf	ormation				
For	the p	urpose of Part 10, the following definitions app	ly:				
	■ <i>E</i> r	nvironmental law means any federal, state, or lo	cal statute or i	regulation cond	cerning pollution	contamination releases of	
		azardous or toxic substances, wastes, or materia					
	in	cluding statutes or regulations controlling the cl	leanup of thes	se substances,	wastes, or materi	ial.	
	- 0	ta anno anno la cationa facilità a anno anno anto an alc					
		te means any location, facility, or property as de used to own, operate, or utilize it, including dis		ny environmen	itai iaw, whether y	you now own, operate, or utilize it	
	01	doca to own, operate, or a timze it, irrolading die	sposai sitos.				
		azardous material means anything an environm			lous waste, hazar	rdous substance,	
	to	xic substance, hazardous material, pollutant, co	ontaminant, o	r similar term.			
Rep	ort all	notices, releases, and proceedings that you kn	ow about, red	ardless of whe	en thev occurred.		
		3- · · · · · · · · · · · · · · · · · · ·	, , ,	,			
0.4					. II II. a la la a la		
24.	паѕ	any governmental unit notified you that you	u may be nac	ne or potentia	illy liable under	or in violation of an environmental law?	
	.	No					
	H	Yes. Fill in the details.					
	Ш	res. I ill ill the details.					
			Governme	ental unit		Environmental law, if you know it	Date of
							notice
		Manager of all a	0				
		Name of site	Governme	ntal unit			
		Number Street	NumberStr	·oot			
		Number Street	Numberen	001			
			City	State	Zip Code		
			Oity	State	Zip Code		
		City State Zip Code					
		•					
25.	Hav	e you notified any governmental unit of any	release of ha	azardous mat	erial?		
	$\overline{\mathbf{V}}$	No					
		Yes. Fill in the details.					
			Governme	ntal unit		Environmental law, if you know it	Date of
			dovernine	intai uiiit		Environmental law, if you know it	notice
		Name of site	Governme	ntal unit			
			2.2.3				
		Number Street	NumberStr	reet	-		
			City	State	Zip Code		
		City State Zip Code	City	State	Zip Code		

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Debto				J.	О	lson	Cas	e number (ii	fknown)		
		First Name		Middle Name	Lá	ast Name	_				
26. F	Hav	e you been a part	y in any judi	cial or administ	rative proce	eeding under	any environmer	ntal law? In	clude settler	nents and orde	ers.
<u>L</u>	싁	No Yes. Fill in the det	tails.								
					Court or a	gency		Nature (of the case		Status of the case
		Case title									Pending
					Court Name	Э					On appeal
		Case number			NumberStre	eet					Concluded
					City	State	Zip Code				
Part 1	1:	Give Details Al	bout Your E	Business or C	onnection	s to Any Bu	siness				
27. V	With	nin 4 years before	you filed for	bankruptcy, di	d you own a	business or	have any of the	following c	onnections t	o any business	s?
					-		r activity, either f	ull-time or p	oart-time		
		A member of A partner in a			LLC) or Iimit	ed liability pa	artnership (LLP)				
		An officer, di	rector, or ma	anaging executi	-						
		An owner of	at least 5% o	of the voting or	equity secur	rities of a cor	poration				
	✓	No. None of the a Yes. Check all tha				ow for each h	ou einese				
L		163. Officer all the	ат арріу аро	we and millinate			ure of the busine	ss	Employer I	dentification r	number Do not
									include So	cial Security n	umber or ITIN.
		Business Name			_				EIIN.		
		Number Street			— Nam	e of account	ant or bookkeep	er	Dates busi	ness existed	
		City	State	Zip Code					From	To	
					Desc	ribe the nat	ure of the busine	ess		dentification n	number Do not number or ITIN.
		Business Name			_				EIN:		
		Number Street							Dates busi	ness existed	
		City	State	Zip Code	Nam	e of account	ant or bookkeep	er	Erom	To	
		Oity	Olate	Zip Oode					From	To	
					Desc	ribe the nati	ure of the busine	ss			number Do not number or ITIN.
		Business Name							EIN:		
		Number Street			— Nam	e of account	ant or bookkeep	ner .	Dates busi	ness existed	
		City	State	Zip Code		o or account	ant or bookkeep	.01	From	То	

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Debt	tor 1 Debra	J.	Olson	Case number (if known)
	First Name	Middle Name	Last Name	
28.	creditors, or other pa	rties.	ou give a financial stateme	ent to anyone about your business? Include all financial institutions,
	Yes. Fill in the de	talls below.		
			Date issued	
	Name		MM/DD/YYYY	
	Number Street		_	
	City	State Zip Code	_	
Part	12: Sign Below			
t	rue and correct. I und	erstand that making a false sta	atement, concealing prope	ents, and I declare under penalty of perjury that the answers are rety, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	/\$/	Debra Olson		· · · · · · · · · · · · · · · · · · ·
	Signat	ure of Debtor 1		Signature of Debtor 2
	Date	4/10/2017		Date
[[No Yes	nal pages to Your Statement of		duals Filing for Bankruptcy (Official Form 107)? bankruptcy forms?
	√ No			• •
	Yes. Name of person	n		Attach the Bankruptcy Petition Preparer's Notice,

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Fill in this information to identify your case:					
Debtor 1	Debra	J.	Olson		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	Northern	District of Illinois		
			(State)		
Case number (If known)					

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral Did you claim the property What do you intend to do with the property that secures a debt? as exempt on Schedule C? Surrender the property. Creditor's name: Retain the property and redeem it. Yes Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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Debtor	Debra	J.	Olson	Case number (if	_
1	First Name	Middle Name	Last Name	known)	
Part 2:	List Your Unexpired Perso	onal Property Leases			
For any informat	unexpired personal property lo	ease that you listed in So ate leases. Unexpired le	ases are leases that are	Contracts and Unexpired Leases (Official Form 106G), fill in the re still in effect; the lease period has not yet ended. You may .s.C. § 365(p)(2).	
Des	cribe your unexpired personal	property leases		Will the lease be assumed?	
Les	sor's name:			No Yes	
	cription of leased perty:				
Les	sor's name:			No Yes	
	cription of leased perty:				
Les	sor's name:			No Yes	
	cription of leased perty:				
Les	sor's name:			No Yes	
	cription of leased perty:				
Les	sor's name:			No Yes	
	cription of leased perty:				
Les	sor's name:			No Yes	
	cription of leased perty:				
Les	sor's name:			No Yes	
	cription of leased perty:				
Part 3:	Sign Below				
	r penalty of perjury, I declare erty that is subject to an unex		intention about any pro	operty of my estate that secures a debt and any personal	
_	's/ Debra Olson		Signat	ature of Debtor 2	
ال	gridiate of Debiol 1		Sigilat	AUTO OF DOUBLOT Z	
Da	ate 4/10/2017 MM/DD/YYYY		Date	MM/DD/YYYY	

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re	Debra J. Olson	Northern B	Car	se No.	
	Debtor				(If known)
			Ch	apter	Chapter 7
D	ISCLOSURE OF C	OMPENSAT	ION OF ATTOR	RNEY FO	OR DEBTOR
compe	ant to 11 U.S.C. § 329(a) and Fe ensation paid to me within one y ed or to be rendered on behalf o	ear before the filing of	the petition in bankruptcy	, or agreed to	be paid to me, for services
For leg	gal services, I have agreed to acc	ept			\$965.00
Prior to	o the filing of this statement I ha	ave received			\$0.00
Balanc	ce Due				\$965.00
2. The so	ource of the compensation paid	to me was:			
	✓ Debtor	Other (spe	cify)		
3. The so	ource of the compensation paid	to me is:			
	✓ Debtor	Other (spe	cify)		
4. 🚺 l h	ave not agreed to share the abo embers and associates of my lav	ve-disclosed compens v firm.	sation with any other perso	on unless they	are
Ш me	nave agreed to share the above-cembers or associates of my law e people sharing in the compens	firm. A copy of the agr			
	rn for the above-disclosed fee, I Analysis of the debtor's financ bankruptcy;				
b.	Preparation and filing of any pe	etition, schedules, stat	ements of affairs and plan	which may be	e required;
C.	Representation of the debtor a	t the meeting of credit	ors and confirmation heari	ng, and any a	djourned hearings thereof;
6. By agr	eement with the debtor(s), the al	oove-disclosed fee doe	es not include the followin	g services:	
		CERT	IFICATION		
	that the foregoing is a complete this bankruptcy proceedings.	statement of any agre	ement or arrangement for	payment to m	e for representation of the
	4/10/2017		/s/ Nathan D	elman	
	Date		Signature of A	ttorney	
			Semrad Law	Firm	
	_		Name of law	/ firm	

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$965.00 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$31.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 1. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

Debra J. Olson Matter Number 512576-001

Initial: <u>00</u> _____

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the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 4/10/17	
Client Ochia Jolsen	Client
Attorney leth	

Debra J. Olson Matter Number 512576-001

Initial: DD _____

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Olson, Debra J.	Case No.	
	Debtor(s)		
		Chapter.	Chapter7
	VERIFICAT	TION OF CREDITOR MAT	TRIX
Ti knowledge	he above named Debtors hereby verify tha e.	t the attached list of creditors is t	rue and correct to the best of their
Date:	4/10/2017	/s/ Olson, Debra Olson, Debra J. Signature of De	

CAPITAL ONE P O Box 30253 Salt Lake City, UT, 84130

PROFESSIONAL PLACEMENT 272 N 12TH ST MILWAUKEE, WI, 53233

SYNCB/WALMAR PO BOX 965024 EL PASO, TX, 79998

SYNCB/WALMART PO BOX 981400 EL PASO, TX, 79998

CERTIFIED SERVICES INC 1733 WASHINGTON ST STE 2 WAUKEGAN, IL, 60085

Best Buy/CBNA 701 East 60th Street Sioux Falls, SD, 57104

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Debtor 1 Debra			se number (if known)	
		ast Name		
First Name	Middle Name estions for Reporting Purposes 16a. Are your debts primarily "incurred by an individual No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily money for a business or ir No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts yo No. I am not filing under Chap	primarily for a personal, fa	amily, or household pu s debts are debts that operation of the busin	rpose." you incurred to obtain ess or investment.
Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	☑ No.	7. Do you estimate that after ands will be available to distri	any exempt property is ibute to unsecured cred	excluded and administrative itors?
18. How many creditors do you estimate that you owe?	☑ 1-49 □ 50-99 □ 100-199 □ 200-999	1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?		\$1,000,001-\$10 \$10,000,001-\$5 \$50,000,001-\$1 \$100,000,001-\$	50 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?	▼ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 \$10,000,001-\$5 \$50,000,001-\$1 \$100,000,001-\$	50 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7: Sign Below				
For you	I have examined this petition, ar correct. If I have chosen to file under Ch of title 11, United States Code. under Chapter 7. If no attorney represents me and	apter 7, I am aware that I r I understand the relief ava d I did not pay or agree to	nay proceed, if eligible ilable under each chap pay someone who is r	e, under Chapter 7, 11,12, or 13 oter, and I choose to proceed not an attorney to help me fill
	out this document, I have obtain I request relief in accordance wi I understand making a false stat connection with a bankruptcy o both. 18 U.S.C. §§ 152, 1341, 1 /s/ Debra Olson Signature of Debtor 1 Executed on 4/10/2017	th the chapter of title 11, lement, concealing proper ase can result in fines up to 1519, and 3571.	United States Code, s ty, or obtaining mone	pecified in this petition. y or property by fraud in conment for up to 20 years, or
	MM / DD	/ YYYY	EXECUTED ON	MM / DD / YYYY

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Fill in this info	rmation to identify your cas	se:		
Debtor 1	Debra	J.	Olson	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
		who hame	Casi Name	
United States	Bankruptcy Court for the:	Northern	District of Illinois (State)	
Case number	···		(Outo)	
(If known)				Check if this is a
Official	Form 106Ded			amended filing
Declarat	tion About an I	- ndividual Debt	or's Schedules	S 12/1
	people are filing together		 	
Part 1: Sig	1341, 1519, and 3571.			\$250,000, or imprisonment for up to 20 years, or both. 18
No No				
Yes.	Name of person		Attach Bankruptcy Signature (Official F	Petition Preparer's Notice, Declaration, and Form 119).
:				
	nalty of perjury, I declare are true and correct.	that I have read the sum	mary and schedules filed	with this declaration and
🗶 /s/ Debr	a Olson Value al	now	×	
, , , , , , , , , , , , , , , , , , , ,	of Debtor 1	Ja e		e of Debtor 2
Date <u>4/1</u>	·····		Date _	
MN	1/DD/YYYY		M	M/DD/YYYY

MM/DD/YYYY

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Debtor 1	1 Debra	J.	Olson	Case number (ff known)
	First Name	Middle Name	Last Name	
28. W i	thin 2 years before yo editors, or other partic	u filed for bankruptcy, did es.	you give a financial stater	nent to anyone about your business? Include all financial institutions,
Z	No Yes. Fill in the details	s helow		
L	1 103.1 ** ** * ** **	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	Date issued	
			2010 100202	
	Name		MM/DD/YYYY	
	Number Street			
	Number Sireet			
	City	State Zip Code		
	=			
Part 12	Sign Below			
a ba	ankruptcy case can re	sult in fines up to \$250,000), or imprisonment for up	perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		of Debtor 1		Signature of Debtor 2
	Date 4/1	0/2017		Date
Did	you attach additional	pages to Your Statement	of Financial Affairs for Ind	viduals Filing for Bankruptcy (Official Form 107)?
V	No			
□	Yes			
Did	you pay or agree to p	ay someone who is not an	attorney to help you fill or	it bankruptcy forms?
V	No			
靣	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

page 12

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ebtor Debra		J.	Olson	Case number (if
First Na	ame	Middle Name	Last Name	known)
2: List You	ır Unexpired l	Personal Property Leas	ses	
ormation belo	w. Do not list re	erty lease that you listed i al estate leases. Unexpire roperty lease if the truste	d leases are leases that	Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).
Describe you	ır unexpired pe	rsonal property leases		Will the lease be assumed?
Lessor's nam	e:			□ No □ Yee
Description o	f leased			Yes
property:				
Lessor's nam	e:	and the second seco	Annual management of the Self-Annual management of the Self-Annual management of the Self-Annual management of	□ No □ Yes
Description o property:	f leased			
Lessor's nam	e:		-	□ No □ Yes
Description o property:	f leased			_
Lessor's nam	 ee:			□ No □ Yes
Description o property:	f leased			_
Lessor's nam	:e;			No Yes
Description o property:	f leased			
Lessor's nam	re:			□ No □ Yes
Description o property:	f leased			
Lessor's nam	e:			□ No □ Yes
Description or property:	f leased			-
nt 3: Sign Be				
		clare that I have indicated unexpired lease.	o my intention about any	property of my estate that secures a debt and any personal
/s/ Debra	7,50	in olser	★ Sig	nature of Debtor 2
Date 4/10	/2017 //DD/YYYY		Da	te

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Olson, Debra J.	Case No	
	Debtor(s)		
		Chapter.	Chapter7
	VERIFI	CATION OF CREDITOR MAT	TRIX
Tr knowledge		ify that the attached list of creditors is tr	rue and correct to the best of their
Date:	4/10/2017	/s/ Olson, Debra Olson, Debra J. Signature of Del	7)

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Debtor 1		J.	Olson	Case number	(if known)		
	First Name	Middle Name	Last Name	Column A Debtor 1	Ď	olumn B ebtor 2 or on-filing spouse	
Do no	ployment compensation t enter the amount if you con the Social Security Act. Instea		received was a benefit	\$0.00			-
For yo	ıu		\$590.00				
For yo	our spouse		\$0.00				
	on or retirement income. D t under the Social Security Ac		ount received that was a	\$0.00			-
amou paymi intemi	me from all other sources not. Do not include any benefit ents received as a victim of a vational or domestic terrorism, and put the total below.	s received under the war crime, a crime ag	Social Security Act or ainst humanity, or				
							-
Total	amounts from separate pages	, if any,		+\$0.00	+		-
11 Cale	culate your total current me	anthly income. Add	lines 2 through 10 for	50.00	+		= \$0.00
each	ımn. Then add the total for C	-		\$0.00			- = -
CON	inin. Their add the total for O	DIGITITI A TO THE TOTAL	Gi Oolaiiii B.	1	J L		Total current
							monthly income
Part 2:	Determine Whether the	Means Test App	lies to You				
12, Calc	ulate your current monthly	income for the year	, Follow these steps:				
12a. (Copy your total current month	ly income from line 1	1.		Copy line	11 here →	\$0.00
	Multiply by 12 (the number of	months in a year).					X 12
12b. ⁻	The result is your annual inco	me for this part of the	form.			1	2b. <u>\$0.00</u>
13 Calcu	late the median family inco	ome that applies to	A CONTRACTOR OF THE CONTRACTOR	:			
Fill in	the state in which you live.	i.	Illinois				
Fill in	the number of people in your	household.		. 3			
Fill in house	the median family income for ≄hold.	your state and size o	f			13	\$66,487.00
To fin	d a list of applicable median in ctions for this form. This list n	ncome amounts, go nay also be available	online using the link spe at the bankruptcy clerk's	cified in the separate office.			1
14. How	do the lines compare?						
14a.	Line 12b is less than or each Go to Part 3.	qual to line 13. On th	e top of page 1, check b	oox 1. There is no presumpti	ion of abuse	e.	
14b.	Line 12b is more than line Go to Part 3 and fill out F	e 13. On the top of p orm 122A-2.	age 1, check box 2, The	presumption of abuse is de	stermined by	y Form 122A-2.	
Part 3:	Sign Below						
Bys	igning here, I declare under p	enalty of perjury that	the information on this s	tatement and in any attachm	nents is true	and correct.	
*	/s/ Debra Olson Olbe	r Du 2		×			
~ 5	ignature of Debtor 1	e ween	······································	Signature of Debtor 2			
_	4/4D/0047			Data #14010047			
£	Date 4/10/2017 MM/DD/YYYY			Date 4/10/2017 MM/DD/YYYY			
	you checked line 14a, do NO' you checked line 14b, fill out						